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UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Lezdey
Serial No.: 10/001,311
Filed: 11/23/2001
Title: ANTIMICROBIAL COMPOSITIONS

Examiner: Levy
Art Unit: 1616

Mail Stop DAC
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**Petition for Revival of an Application
For Patent Abandoned Unavoidably**

Submitted herewith are:

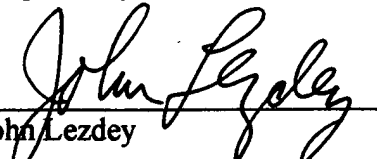
- 1) Response to Official Action
- 2) Declaration stating entire delay unavoidable
- 3) Petition Fee
- 4) Return Postcard

The petitioner is a small entity.

The entire delay in filing the required reply to the Official Action of June 23, 2004 until the filing of a grantable petition was unavoidable.

Favorable action is earnestly solicited.

Respectfully submitted,


John Lezdey

John Lezdey & Associates
4625 East Bay Drive
Suite 302
Clearwater, FL 33764
(727) 539-0633

03/15/2005 MAHNE1 00000050 10001311

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250.00 OP



UNITED STATES PATENT AND TRADEMARK OFFICE

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Serial No.: 10/001,311
Filed: 11/23/2001
For: ANTIMICROBIAL COMPOSITIONS

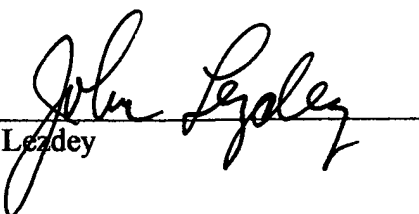
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Declaration

1. The Official Action dated June 23, 2004 was received and a response was prepared to be filed before September 23, 2004.
2. On August 7, 2004 the undersigned sole practitioner while on vacation in Cape Cod, MA suffered a fall which resulted in a broken back that caused partial paralysis of the legs. (See attached hospital record).
3. The undersigned was hospitalized until September 10, 2004 and undergoing physical therapy until October, 2004.
4. The undersigned was unable to return to Florida until November 24, 2004 and return to the office until December 3, 2004.
5. It was not know that the application was abandoned until the Notice of Abandonment was received.
6. The undersigned was not able to return a regular schedule until February 2005 and still maintains a body cast because of the injury.

WHEREFORE, the failure to timely file the Amendment was unavoidable.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.



John Lezdey



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Amendment Under 37 CFR 1.111 and 1.115

In response to the Official Action dated June 23, 2004, kindly amend this application as follows :

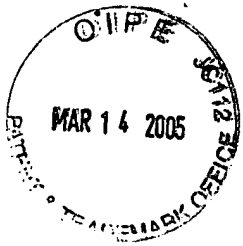
In the Claims

1. (Canceled)
2. (Previously Amended) The composition of claim 17 wherein the polycarboxylic acid is selected from the group consisting of succinic, citric, and tartaric.
3. (Canceled)
4. (Canceled)

5. (Previously Amended) The composition of claim 17 wherein the solvent comprises ethanol.
6. (Previously Amended) The composition of claim 17 including a fragrance.
7. (Previously Amended) The composition of claim 17 wherein said fragrance is d-limonene.
8. (Canceled)
9. (Canceled)
10. (Canceled)
11. (Currently Amended) An antimicrobial composition containing antimicrobial complexes free of ~~halogenated compounds~~ chlorinated phenols formed by the admixture comprising: a) about 0.4 to 10% by weight phenol; b) about 0.4 to 10% by weight o-phenylphenol; c) about 0.4 to 10% by weight of a dicarboxylic acid having 2 to 4 carbon atoms; d) about 0.4 to 10% by weight of 1, 3-propanedamine, N-9-octadecenyl; and e) the remainder a solvent selected from the group consisting of a lower alkanol of 1-3 carbon atoms and water.
12. (Previously Amended) A combination of the composition of claim 11 and a polymer capable of forming a fiber or a film.
13. (Original) The combination of claim 12 wherein said polymer is an acrylic polymer.
14. (Currently Amended) The combination of claim 12 polymer is a cellulosic polymer.
15. (Canceled)

16. (Previously Amended) The combination of claim 11 wherein said polymer is an acrylic polymer.

17. (Currently Amended) A film forming antimicrobial composition free of ~~halogenated compounds~~ chlorinated phenols formed by admixing: a) about 0.4 to 10% by weight of phenol; b) about 0.4 to 10% by weight of o-phenylphenol; c) about 0.4 to 10% by weight of a polycarboxylic acid having 2 to 4 carbon atoms; d) about 0.4 to 10% by weight of 1, 3-propanediamine, N-9-octadecenyl; and 3) a solvent selected from the group consisting of water and an alkanol of ~~2-4~~ 1-3 carbon atoms as the remainder.



Remark

The interview held with the Examiner is herewith noted with appreciation.

The claims were rejected under 35 USC 112 because of the terms "alkanol" and "free of halogenated compounds".

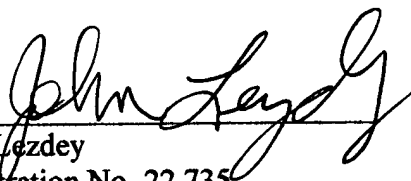
As discussed with the Examiner, the term "alkanol" has been limited to ~ alkanol of 1-3 carbon atoms. This term is supported in the specifications prior to the Examples by the sentence "The preferred alcohols are methyl, ethyl and isopropyl alcohol."

The term "free of halogenated compounds" has been limited to ~ free of chlorinated phenols ~ as disclosed in the statement "The chlorinated phenols can also be used but they are environmentally unacceptable."

Consequently, the Examiner's objections have been obviated and the application is now in condition for allowance.

Prompt and favorable action are earnestly solicited.

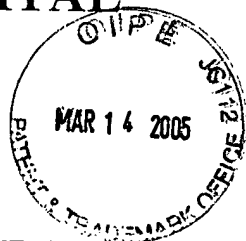
Respectfully submitted,
JOHN LEZDEY & ASSOCIATES



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(727) 539-0633

CAPE COD HOSPITAL

RADIOLOGY DEPARTMENT
27 Park St.
Hyannis, MA 02601
(508) 771-1800



Medical Record No: 075-15-79
Name: LEZDEY, JOHN
Ord Phys: PAPAVALILIOU MD, ACHILLES
Att Phys: CLAYTON M.D., SHERRI
DOB: 10/09/1931 Age: 72 Sex: M
Acct: 55645683 Radiology #: 75-15-79
Status: DIS IN Loc: M3.3522
Patient Phone: 508-240-1514

Exam Performed at: CAPE COD HOSPITAL

Reason For Exam: L4 FRACTURE

EXAM#	TYPE/EXAM	EXAM DATE	- TIME
001643877	CT/L-SPINE W/O CONTRAST	08/10/2004	- 1042
001644110	CT/COR, SAG, 3D RECONSTRUCTION	08/10/2004	- 1042

NONCONTRAST CT SCAN OF THE LUMBAR SPINE:

CLINICAL HISTORY: L4 compression fracture.

TECHNIQUE: CT scan of the lumbar spine was performed including sagittal and coronal reformatted images.

FINDINGS: There is a compression fracture of the L4 vertebral body which involves the posterior vertebral body wall. There is approximately 25% loss of vertebral body height. There is buckling of the posterior vertebral body wall into the spinal canal resulting in moderate to severe stenosis. Severe spinal stenosis is also seen at the L3-4 disc level due to disc bulging and ligamentous thickening.

The remainder of the vertebral body heights and disc levels are unremarkable.

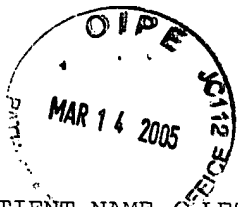
IMPRESSION:

- 25% burst type compression fracture of the L4 vertebral body. There is posterior buckling of the vertebral body wall which results in moderate to severe canal stenosis. There is also moderate to severe canal stenosis of the L3-4 disc level due to disc bulging.

** REPORT SIGNATURE ON FILE 08/10/2004 **
Reported By: David Rowe, MD
Signed By: Rowe MD, David

CC: SHERRI CLAYTON M.D.; ACHILLES PAPAVALILIOU MD

Transcribed Date/Time: 08/10/2004 (1221)
Transcriptionist: N-KAN
Printed Date/Time: 08/20/2004 (0855)



CAPE COD HOSPITAL
27 Park Street
Hyannis, MA 02601

*** EMERGENCY CENTER REPORT ***

PATIENT NAME: LEZDEY, JOHN
DOB: 10/09/31
ACCOUNT #: 55645683
MEDICAL REC#: 0751579
Pt. STATUS: DIS IN
FIN CLASS: ME
SS#: 120-24-3090

ER M.D.: PENFIELD M.D., DAVID J
PRIMARY CARE M.D.: OUT OF AREA PROVIDER, A
ADMIT DATE: 08/07/04
ADMIT TIME: 1914
RESERVATION DATE: 08/07/04
Pt. Location: M3

=====

SUBJECTIVE: A 72-year-old male presents with a fall. He states he was trying to get into the house. He went up a step to get in the door and fell backwards losing his balance. He states he does lose his balance quite easily, especially when he does steps. When he fell backwards he hit his car, and he apparently put a dent in the door of the car per rescue. He states he blanked out for just probably a second or so. He denies any headache, however. He states his shoulders were hit first, but his primary pain is in the lower back.

PMHX: Significant for hypertension, arthritis, chronic atrial fibrillation, transient ischemic attack in 1999, neuropathy.

MEDS: Coumadin and Zestril.

SHX: He is married and lives locally in Eastham. He is self-employed and does not have a local physician.

FHX: Noncontributory.

ROS: Denies any headache, double vision or blurred vision. Denies any nausea or vomiting. Denies any dizziness. He does have balance problems, however, which is ongoing and chronic. Denies any neck pain. He denies any chest pain, shortness of breath. Denies any anterior abdominal pain. Denies any numbness or tingling in the legs. Denies any weakness in his legs. He denies any edema.

OBJECTIVE: VITAL SIGNS: B/P 150/90. P 80. RR 18. T 97.2. Pulse oximetry 100% on room air. GENERAL: He is alert and oriented x3. He is boarded and collared. He is removed from the collar. HEENT: Head - Normocephalic, atraumatic. Eyes - Pupils equal; EOMI; conjunctivae not injected. Ears - Hearing intact, no otorrhea. Throat - Tongue moist and midline. NECK: He has no neck tenderness. He has good range of motion of his neck. His cervical spine is clinically cleared. Neck is supple, no visible thyromegaly or scars. CHEST: Lungs clear without crackles or wheezes. Breath sounds equal bilaterally. HEART: Irregularly irregular. CHEST WALL: Nontender. ABDOMEN: Nontender. SPINE: He is tender over the lower lumbar spine. This is quite pronounced and is local and focal at the level of about L4-L5. NEUROLOGIC: He has no numbness or tingling of the legs. He has no weakness in the legs.

ED COURSE: X-rays are obtained and shows a compression fracture of L4, probable indeterminate age, but presumptively moderate of age, but it cannot be determined. Clinically he seems to possibly have an acute component of it, as he is tender right over the same area. He is given Darvocet N-100 and he is unable to get up after this. He is given Percocet 1 orally, and remains unable to ambulate safely, but he is able to get up however. He is very unsteady with a lot of backwards propulsion. He looks like he is a clear candidate for significant increased falls.

ASSESSMENT:

1. Compression fracture of L4.
2. Instability on his feet with chronic ataxia.



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TRANSMITTAL

Dear Sir:

Please find enclosed for filing:

<input checked="" type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Check in the Amount of \$250.00
<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Extension of Time
<input checked="" type="checkbox"/> Post Card	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Certificate of Express Mail	<input checked="" type="checkbox"/> Declaration

Date: March 10, 2005

Docket No.: 1434-C

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING
DEPOSITED WITH THE UNITED STATES POSTAL SERVICE
AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO:
COMMISSIONER OF PATENTS AND TRADEMARKS
Alexandria, VA 22313-1450

On March 10, 2005 Date of Deposit

PRINT OR TYPE NAME OF PERSON SIGNING CERTIFICATE

John Lezdey

SIGNATURE OF PERSON SIGNING CERTIFICATE DATE

John Lezdey 3-10-05

Respectfully submitted,

John Lezdey
John Lezdey

Registration No. 22,735

JOHN LEZDEY & ASSOC.

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